

Joel A. Smithers, D.O.

WV LIC: 2913 • VA LIC: 010220464

DEA: FS4850459 • NPI #: 1659639631

445 Commonwealth Blvd East

Martinsville, VA 24112

Phone: (844) 373-7883 • Fax: (844) 550-7109

scribble (fill date: 7-28-16)

Name Michelle Smith DOB 10.14.80

Address DX: 689.21. Date 226.16

Rx Opana ER (crush resist.) 1-24
30mg 25-49
 50-74
 75-100
 101-150
 151 and over

1ccOPY

Disp: #60 (sixty). 7/10

Refill NB 1 2 3 4 5

D.O.

This prescription may be filled with a generically equivalent drug product unless the words "Brand Medically Necessary" are written, in the practitioner's own handwriting, on this prescription form.

Prescription is void if more than one (1) prescription is written per blank

MS2_001

Script # 1487

Joel A. Smithers, D.O.

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445 Commonwealth Blvd East

Martinsville, VA 24112

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earliest fill date: 7-28-16.

Name Michelle Smith DOB 10/14/80

Address DX - 689-21 Date 7-26-16

R

Oxycodone 10mg (IR)

tab q6 80 PRN

COPY break thru pain

Refill NR 1 2 3 4 5

- 1-24
- 25-49
- 50-74
- 75-100
- 101-150
- 151 and over

Script # 1488

D.O.

This prescription may be filled with a generically equivalent drug product unless the words "Brand, Medically Necessary" are written, in the practitioner's own handwriting, on this prescription form.

Prescription is valid if more than one (1) prescription is written per blank

MS2_002